| FRANSMITTAL  |  |  |                              |                        |                                       |  | Attorney Docket No.                |                   |                              | 2100/23                  |   |                 |                                |                  |  |
|--|--|--|------------------------------|------------------------|---------------------------------------|--|------------------------------------|-------------------|------------------------------|--------------------------|---|-----------------|--------------------------------|------------------|--|
|  |  |  |                              |                        |                                       |  | Application Number                 |                   |                              | 09/993,359               |   |                 |                                |                  |  |
| Filing Date  |  |  |                              |                        |                                       |  |                                    |                   |                              | November 19, 2001        |   |                 |                                |                  |  |
| JUN 2 8 2004 First Named Inv   |  |  |                              |                        |                                       |  |                                    | nve               | entor                        | Scott D. SLOMIANY et al. |   |                 |                                |                  |  |
| (to be used for all correspondence after initial filing)                               |  |  |                              |                        |                                       |  | Group Art Unit                     |                   |                              | 3714                     |   |                 |                                |                  |  |
| RADEMAR  |  |  |                              |                        |                                       |  | Examiner                           | Corbett B. Coburn |                              |                          |   |                 |                                |                  |  |
| ENCLOSURES (check all that apply)  |  |  |                              |                        |                                       |  |                                    |                   |                              |                          |   |                 |                                |                  |  |
| $\boxtimes$  |  | Amendment / Response to Office Action mailed 3-24- 2004  |                              |                        |                                       | Assignment Papers (for an Application)   |                                    |                   |                              |                          | Appeal Communication to Board of Appeals and Interferences        |                 |                                |                  |  |
| :  |  | After Final  |                              |                        |                                       | Drawings: 25 sheets Corrected Formal   |                                    |                   |                              |                          | Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |                 |                                |                  |  |
|  | Affidavits/declaration(s)                              |  |                              |                        |                                       | After Allowance Communication to Group   |                                    |                   |                              |                          |   |                 |                                |                  |  |
|  |  |  |                              |                        |                                       | Petition Routing Slip (PTO/SB/69) and Accompanying Petition  |                                    |                   |                              |                          | Proprietary Information   |                 |                                |                  |  |
|  | Status I   | Status Letter  |                              |                        |                                       | To Convert a Provisional Application   |                                    |                   |                              |                          | Post Card Receipt   |                 |                                |                  |  |
|  | Extension of Time Request (duplic)                     |  |                              |                        |                                       | Power of Attorney, Revocation<br>Change of Correspondence<br>Address   |                                    |                   |                              |                          | Additional Enclosure(s) (please identify below):                  |                 |                                |                  |  |
|  | Express Abandonment Request                            |  |                              |                        | Terminal Disclaimer                   |  |                                    |                   |                              |                          |   | RECEIVED        |                                |                  |  |
|  | Information Disclosure<br>Statement, PTO-1449, w/o art |  |                              |                        | Applicant claims small entity status. |  |                                    |                   |                              |                          |   | JUL 0 1 2004    |                                |                  |  |
|  | Certified Copy of Priority Document(s)                 |  |                              |                        |                                       | Request of Refund  |                                    |                   |                              |                          | TECHNOLOGY CENTER R3700   |                 |                                |                  |  |
| Response to Missing Parts/ Incomplete Application                                      |  |  |                              |                        |                                       | The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account No. 50-0930. A duplicate copy of this sheet is enclosed. |                                    |                   |                              |                          |   |                 |                                |                  |  |
| CALCULATION OF FEE  Small Entity Large   |  |  |                              |                        |                                       |  |                                    |                   |                              |                          |   |                 | Entity                         |                  |  |
|  |  |  |                              |                        | ighest No.                            |  |                                    |                   | Oman                         | T                        | T   |                 | Large                          |                  |  |
|  |  | s After  |                              | Previously<br>Paid For |                                       |  | Present<br>Extra                   |                   | Rate                         | Add<br>Fee               |   | or              | Rate                           | Add'I<br>Fee     |  |
| Total  |  | 7  | Minus                        | 116                    |                                       |  | 0                                  | x \$9=            |                              | =                        | 0   |                 | x \$18=                        |                  |  |
| Indep.   |  |  | Minus                        | 27                     |                                       |  | 0                                  | x \$43=           |                              | 7                        | 0   |                 | x \$86=                        |                  |  |
| First Presentation of Multiple Dep. Claim  |  |  |                              |                        |                                       |  | <u> </u>                           |                   | +\$145=                      |                          |   |                 | + \$290=                       |                  |  |
| total add'l fee   \$ 0   total add'l fee    SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |  |  |                              |                        |                                       |  |                                    |                   |                              |                          |   |                 |                                | \$0              |  |
| Firm   |  |  |                              |                        |                                       |  |                                    |                   |                              |                          |   |                 |                                |                  |  |
| or   | dual nam   | <sub>ie</sub>  | Allison M. Da                | udley,                 | Reg. N                                |  |                                    |                   |                              |                          |   | •               |                                |                  |  |
| Individual name  |  |  |                              |                        |                                       |  |                                    |                   |                              |                          |   |                 |                                |                  |  |
| Signature  |  |  |                              |                        | Manile                                |  |                                    |                   |                              | Date: June 24, 2004      |   |                 |                                |                  |  |
|  |  | 1  |                              |                        |                                       |  | TIFICATE OF                        |                   |                              |                          |   |                 |                                |                  |  |
| I here<br>envelo   | by certify<br>ope addre                                | that the second the se | nis correspon<br>o: Commissi | dence<br>oner f        | e is bei<br>or Pate                   | ng de<br>nts, F  | eposited with to<br>P.O. Box 1450, | he<br>Ale         | United State<br>exandria, VA | es Post<br>2231:         | al Sei<br>3-145   | rvice<br>0 on . | as first class<br>June 24, 200 | mail in an<br>4. |  |
|  |  |  | 1/1.                         | //                     | 1-                                    | •  |                                    | •                 |                              |                          |   |                 |                                |                  |  |
| Signa  | ture   | Michae   | el H. Baniak                 | / Alliso               | on M. C                               | udle   | V 7                                |                   | -                            | Date                     | e: Ju   | une 2           | 4, 2004                        |                  |  |